

## ALASKA MEDICAID

### **Botulinum Toxin Preparations**

AbobotulinumtoxinA: Dysport®  
RimabotulinumtoxinB: Myobloc®  
OnabotulinumtoxinA: Botox®

#### **REIMBURSABLE INDICATIONS:**

“Botox® is an acetylcholine release inhibitor and a neuromuscular blocking agent indicated for:

- Prophylaxis of headaches in adult patients with chronic migraine ( $\geq 15$  days per month with headache lasting 4 hours a day or longer)
- Treatment of upper limb spasticity in adult patients
- Treatment of cervical dystonia in adult patients, to reduce the severity of abnormal head position and neck pain
- Treatment of severe axillary hyperhidrosis that is inadequately managed by topical agents in adult patients
- Treatment of blepharospasm associated with dystonia in patients  $\geq 12$  years of age
- Treatment of strabismus in patients  $\geq 12$  years of age”<sup>1</sup>

“Dysport®: is an acetylcholine release inhibitor and a neuromuscular blocking agent indicated for:

- the treatment of adults with cervical dystonia to reduce the severity of abnormal head position and neck pain in both toxin-naïve and previously treated patients”<sup>2</sup>

“MYOBLOC is indicated for the treatment of adults with cervical dystonia to reduce the severity of abnormal head position and neck pain associated with cervical dystonia.”<sup>3</sup>

#### **CRITERIA FOR APPROVAL:**

1. The patient is being treated for cervical dystonia (Botox®, Dysport®, Myobloc®); **OR**
2. The patient is being treated for upper limb spasticity (Botox®); **OR**
3. The patient is being treated for strabismus and is  $\geq 12$  years old (Botox®); **OR**
4. The patient is being treated for severe axillary hyperhidrosis that has been inadequately managed by topical agents in patients  $\geq 17$  years old (Botox®); **OR**
5. The patient is being treated for blepharospasm associated with dystonia **IF**
  - a. the patient is  $\geq 12$  years old; **AND**
  - b. the patient is unable to open their eyelid(s) or is functionally blind due to dystonia; **AND**
  - c. the medication (Botox®) is ordered by a neurologist or ophthalmologist.
6. Prophylaxis of headaches **IF**
  - a. the patient is  $\geq 18$  years old; **AND**
  - b. the patient has chronic migraines ( $\geq 15$  days per month with headache lasting 4 hours a day or longer); **AND**

- c. the patient is on a medication regimen for migraine prophylaxis per the American Academy of Neurology (AAN) clinical practice guidelines<sup>4</sup>; **AND**
- d. the medication (Botox<sup>®</sup>) is ordered by a neurologist.

**CRITERIA CAUSING DENIAL:**

- 1. The medication is being used for cosmetic purposes, including treatment of glabellar lines.

**LENGTH OF AUTHORIZATION:**

- 1. Coverage may be approved for up to 6 months.

**REFERENCES / FOOTNOTES:**

<sup>1</sup> Botox<sup>®</sup> package insert, available at:  
<[http://www.allergan.com/assets/pdf/botox\\_pi.pdf#page=1](http://www.allergan.com/assets/pdf/botox_pi.pdf#page=1)> Accessed 03/21/2011.

<sup>2</sup> Dysport<sup>®</sup> package insert, available at:  
<[http://www.medicis.com/products/pi/pi\\_dysport\\_printer.pdf](http://www.medicis.com/products/pi/pi_dysport_printer.pdf)> Accessed 03/21/2011.

<sup>3</sup> Myobloc<sup>®</sup> package insert, available at: <[http://www.myobloc.com/hp\\_about/PI\\_5-19-10.pdf](http://www.myobloc.com/hp_about/PI_5-19-10.pdf)>  
Accessed 03/21/2011.

<sup>4</sup> Silberstein SD. Practice parameter: evidence-based guidelines for migraine headache (an evidence-based review): report of the Quality Standards Subcommittee of the American Academy of Neurology. Neurology. 2000 Sep 26;55(6):754-62.